IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

IN RE:)
Nusmira Dedic) CHAPTER 13
) No. 1-17-05071 RNO
	Debtors)

DEBTOR'S AMENDED SCHEDULE I

The Debtor(s) in the above-captioned case hereby amend schedule

I (correcting changes to income since the time of filing) by substituting the attached schedule for the schedule originally filed, pursuant to Fed. R. Bankr. P. 1009.

Dated: //- /2 - (8

Michael S. Travis
ID No. 77399
3904 Trindle Road
Camp Hill, PA 17011
(717) 731-9502
mtravislaw@comcast.net
Attorney for Debtor

Fi	ll in this informa	tion to ide <u>nti</u>	fy you <u>r case:</u>					
		Nusmira		Dedic				
		First Name	Middle Name	Last Name	1	cr	neck if this is:	
	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		г	An amended filing	
	Jnited States Bankru					17	A supplement showing postpetition	n
С		17-05071	MIDDLE DIS	T. OF PENNSYI			chapter 13 income as of the follow	
	icial Form 106	1		· · · · · · · · · · · · · · · · · · ·		1	MM / DD / YYYY	
	hedule I: You	-						12/1
esp iclu bou our	ionsible for supplyii ude information abo ut your spouse. If m name and case nui	ng correct inform ut your spouse. Hore space is ne mber (if known).	nation. If you are If you are separ eded, attach a se Answer every c	emarried and not ated and your sp parate sheet to t	filing joint ouse is no	ly, and you t filing with	nd Debtor 2), both are equally r spouse is living with you, you, do not include information f any additional pages, write	
Pa	rt 1: Describ	e Employmer	t					
	Fill in your employinformation.	nent		Dobtor 4			Politic 0	
	If you have more tha			Debtor 1			Debtor 2 or non-filing spouse	
	job, attach a separat with information about		oyment status	☐ Employed Not employ	ed		✓ Employed☐ Not employed	
	additional employers	Occu	oation				Mechanic	
	Include part-time, se or self-employed wor	le .	oyer's name				Sutliff VW	
	Occupation may incl	ude Empl	over's address					
	student or homemak applies.	aker, if it		Number Street			Number Street Harrisburg	
				City	State	Zip Code	City State Zig	Code
		How I	ong employed th	ere?		·	17	. 0040
_				***************************************			17	
			onthly Income					
stin on-fi	n <mark>ate monthly incom</mark> iling spouse unless y	e as of the date	you file this form	. If you have noth	ing to repo	rt for any line	e, write \$0 in the space. Include you	r
you		ouse have more	than one employe	r, combine the info	ormation fo	r all employe	ers for that person on the lines below	ı. If
					For	Debtor 1	For Debtor 2 or non-filing spouse	
F	List monthly gross (payroll deductions). Would be.				2	\$0.00	\$0.00	
E	Estimate and list mo	nthly overtime	oay.		3. +	\$0.00	\$0.00	
(Calculate gross inco	ome, Add line 2	+ line 3.		4.	\$0.00	\$0.00	

Schedule I: Your Income

page 1

Official Form 106I

Del	otor 1	Nusmira	Dedic		Case nu	mber (if known)	17	-05071
					For Debtor 1	For Debtor non-filing s		e
	Copy	line 4 here		4.	\$0.00		0.00	
5.	List a	ali payroli de	ductions:					
	5a.	Tax, Medica	re, and Social Security deductions	5a.	\$0.00	\$0	0.00	
	5b.	Mandatory o	ontributions for retirement plans	5b.	\$0.00	\$0	0.00	
	5c.	Voluntary co	ontributions for retirement plans	5c.	\$0.00	\$(0.00	
	5d.	Required rep	payments of retirement fund loans	5d.	\$0.00	\$0	0.00	
	5e.	Insurance		5e.	\$0.00	\$(0.00	
	5f.	Domestic su	pport obligations	5f.	\$0.00	\$0	0.00	
	5g.	Union dues		5g.	\$0.00	\$0	0.00	
		Other deduc Specify:	tions.	_ 5h. +	\$0.00	\$(0.00	
6.	Add : 5g +		eductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$0.00	\$0	0.00	
7.	Calc	ulate total m	onthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$(0.00	
8.	List a	all other inco	me regularly received:					
			rom rental property and from operating a offession, or farm	8a.	\$0.00	\$0	0.00	
	!	gross receipts	ement for each property and business showing s, ordinary and necessary business expenses, and thly net income.					
	8b.	Interest and	dividends	8b.	\$0.00	\$0	0.00	
			ort payments that you, a non-filing spouse, or a egularly receive	8c.	\$0.00		0.00	
			ny, spousal support, child support, maintenance, ment, and property settlement.					
	8d. (Unemployme	ent compensation	8d.	\$2,072.00	\$0	0.00	
		Social Secur		8e.	\$0.00		0.00	
	((Include cash cash assistan	nment assistance that you regularly receive assistance and the value (if known) or any non- ice that you receive, such as food stamps er the Supplemental Nutrition Assistance Program) bsidies.	8f.	\$0.00	t o		
			etirement income	-	\$0.00		0.00	
		Other month		8g.	\$0.00	- \$0	0.00	
			ome tax refund	8h.+	\$0.00	\$0	0.00	
9.	Add a	all other inco	me. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,072.00	\$0	0.00	
10.	Calcu Add ti	ulate monthly he entries in l	r income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,072.00	+\$0	0.00	= \$2,072.00
11.	friend	le contribution s or relatives		iold, yo	ur dependents, you			
	Do no	t include any	amounts already included in lines 2-10 or amounts tha	t are no	ot available to pay e	expenses listed	in Sch	hedule J.
	Speci	fy:					11.	+\$0.00
12.	incom	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly neome. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.						Combined
13. Do you expect an increase or decrease within the year after you file this form?						monthly income		
		No. Yes. Explain:	Debtor lost job, is seeking employment Spouse is moving from residence once sold v			r		
					<u>-</u>	<u>-</u>		

Schedule I: Your Income

page 2

Official Form 106I

IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

IN RE: Nusmira Dedic)) CHAPTER 13
	Debtors) No. 1-17-05071 RNO

Debtor(s) Verification

I declare under penalty of perjury that I have read the attached amended schedule(s) and they are true and correct to the best of my knowledge, information and belief.

Date: 10 29 18

Nusmira Dedic, Debtor

IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

IN RE:)
Nusmira Dedic) CHAPTER 13
) No. 1-17-05071 RNO
	Debtors)

Certificate of Service Amended Schedule I

I, Michael S. Travis, attorney for the Debtor(s), hereby certifies that a copy of the foregoing amendment of the Debtor(s) has this day been served upon the trustee in this case and affected creditor(s) and persons listed as follows by firstclass mail or the means specified.

> Charles J. DeHart, III, Esquire Standing Chapter 13 Trustee (electronically served)

United States Trustee (electronically served)

Nusmira Dedic (electronically served)

> Michael S. Travis Attorney for Debtor(s) 3904 Trindle Road Camp Hill, PA 17011 (717) 731-9509

Date: 11-12-18